Washington Metropolitan Area Transit Commission

2010 Carrier Annual Report Form

PLEASE NOTE:

ANNUAL REPORT OF:

- Each carrier holding a WMATC certificate of authority on January 1, 2010, must file a complete 2010 annual report and pay a \$150 annual fee on or before **February 1, 2010**. To be timely, the report and fee must be received at WMATC's office by this date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a \$100 late fee. Each carrier that fails to pay the \$150 annual fee on time will be assessed a separate \$100 late fee.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 4, 2010.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

	GIZACIICW	Wourgasso Nerri,	t/a H&H GN Transport		
*WMATC No.	*Name of Ca	rrier (as shown on ce	rtificate of authority)		
3104 South Ga	te Drive, #20	4, Alexandria, VA	22306-6630		
*Street Address o	f Principal Plac	e of Business			
Mailing Address (if different from	street address)			
(571) 236-1679	,	(703) 619-0045		gizachewnerri@yahoo.com	
*Telephone Numb	oer O	ther Telephone	Fax Number	E-mail	
*Name	++ cuigasso iv	NOTE TO SERVICE TO SER	*Title		
Ms/Gizachew \ *Name	wourgasso N	erri	Sole Proprietor *Title		
			F	1	
(571) 236-1679			(703) 619-0045	gizachewnerri@yahoo.com	
(571) 236-1679 *Telephone Numb		ther Telephone	(703) 619-0045 Fax Number	gizachewnerri@yahoo.com E-mail	
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(continued on next page)

Fax Number

Other Telephone

E-mall

Telephone Number

4.	*CHANGES: Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

5. *LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS: Choose one of the following three options: (1) list your vehicles below; (2) make any necessary corrections on the enclosed vehicle list and return it with this form; or (3) attach your own vehicle list. Include <u>all</u> required information.

Fleet No.	*Model Year	*Make	*Vehicle VIN (17 digits)	*License Plate Number	*State Registered	*Seating Capacity
	2004 Ford		1FBSS31L54HA31480	4512196	VA	1.5
					VEF	7
				ECEI		
				JAN 26	2010	И
				Washington Met	ropolitan	
				Area Transit Cor	nmission	

6. *CERTIFICATION:

I certify that this report, including any attachments, was prepared by me or under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

GIZACHEW Wourgasso Nerri	Inn In Veri
*Name (Type or Print)	*Signature
Owner	01/22/2010
*Title	*Date

WMATC No: 981 Washington A

Washington Metropolitan Area Transit Commission

2010 Annual Report: Revenue Vehicle List

Name:

Gizachew Wourgasso Nerri

Trade Name: H&H GN Transport

Carriers are required to provide a complete list of revenue vehicles used in WMATC operations. You may choose from the following options: (1) list your vehicles in the space provided on page 2 of the annual report form; (2) make any necessary corrections to this list and submit it with your annual report; or (3) attach your own vehicle list. Failure to report revenue vehicles may result in a civil forfeiture.

Check this box if all information on this list is complete and accurate.

Fleet No.	*Model Year	*Make	*VIN (17 digits)	*Plate	*State Registered	*Capacity
***************************************	sanni alo i i i i kilippolitika na na a	miles, depotspalaceae en 1947 e 194		$(x+y)^2/2x+2^2(x+y)^2/2x+2^2(x+y)^2$		Ara com commensus
	2004	Ford	1FBSS31L54HA31480	H512196	VA	15



